Debtor 1	Darlene	L.	Lookingbill	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		Middle District of Pennsylvania		
Case number 1:24-bk-007		754		

Check as directed in lines 17 and 21:
According to the calculations required by this Statement:
1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
☑3. The commitment period is 3 years.
☐4. The commitment period is 5 years.
Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Pa	rt 1: Calculate Your Average Monthly Income						
1.	What is your marital and filing status? Check one only. ✓ Not married. Fill out Column A, lines 2-11. ☐ Married. Fill out both Columns A and B, lines 2-11.						
10 va ex	ill in the average monthly income that you received from a 01(10A). For example, if you are filing on September 15, the aried during the 6 months, add the income for all 6 months a xample, if both spouses own the same rental property, put the property.	e 6-month period wand divide the total	ould be Marcl by 6. Fill in th	n 1 thre le resu	ough August 31. If th llt. Do not include an	e amount of your montly income amount more	hly income than once. For
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, and c payroll deductions).	commissions (befo	ore all		\$0.00		
3.	Alimony and maintenance payments. Do not include payer	ments from a spou	se.		\$0.00		
4.	All amounts from any source which are regularly paid fo your dependents, including child support. Include regula unmarried partner, members of your household, your deper roommates. Do not include payments from a spouse. Do not line 3.	r contributions fror endents, parents, a	m an ind	r	\$0.00		
5.	Net income from operating a business, profession, or farm	Debtor 1	Debtor 2				
	Gross receipts (before all deductions)	\$0.00	\$0.00				
	Ordinary and necessary operating expenses	\$0.00	\$0.00				
	Net monthly income from a business, profession, or farm	\$0.00	\$0.00	Copy here –	\$0.00		
6.	Net income from rental and other real property	Debtor 1	Debtor 2				
	Gross receipts (before all deductions)	\$0.00	\$0.00				
	Ordinary and necessary operating expenses	\$0.00	\$0.00				
	Net monthly income from rental or other real property	\$0.00	\$0.00	Copy here ⊸	\$0.00		

Debtor 1 Darlene Lookingbill Case number (if known) 1:24-bk-00754

First Name Middle	Name Last Name				
			olumn A btor 1	Column B Debtor 2 or non-filing spouse	
7. Interest, dividends, and royalties			\$0.00		
8. Unemployment compensation			\$0.00		
Do not enter the amount if you contend th	at the amount received was a be	enefit under			
the Social Security Act. Instead, list it here	ə:	\downarrow			
For you		\$2,293.40			
For your spouse					
9. Pension or retirement income. Do not incurded the Social Security Act. Also, excep include any compensation, pension, pay, States Government in connection with a cleath of a member of the uniformed servi under chapter 61 of title 10, then include the exceed the amount of retired pay to which under any provision of title 10 other than of	of as stated in the next sentence annuity, or allowance paid by the disability, combat-related injury of ices. If you received any retired put that pay only to the extent that it in you would otherwise be entitled.	, do not e United r disability, or pay paid does not	\$0.00		
10. Income from all other sources not lister not include any benefits received under a victim of a war crime, a crime against the terrorism; or compensation, pension, pay States Government in connection with a death of a member of the uniformed services separate page and put the total below.	the Social Security Act; payment numanity, or international or dom y, annuity, or allowance paid by t disability, combat-related injury	ts received as nestic rhe United or disability, or			
		_			
Total amounts from separate pages, if any	√.	+_		+	
			\$0.00		= \$0.00
 Calculate your total average monthly in column. Then add the total for Column A 		or each		т	Total average
					monthly income
Part 2: Determine How to Measure Y	our Deductions from Inco	me			
12. Copy your total average monthly incom	ne from line 11				\$0.00
13. Calculate the marital adjustment. Check					
·	Cone.				
You are not married. Fill in 0 below.	annish van Fill in Ohalan				
You are married and your spouse is filing.	• ,				
You are married and your spouse is not Fill in the amount of the income listed in	• •	T regularly poid for the	a hausahald avnana	on of you or	
your dependents, such as payment of the dependents.					
Below, specify the basis for excluding the additional adjustments on a separate page 1		come devoted to each	purpose. If necessa	ry, list	
If this adjustment does not apply, enter	0 below.				
		_			
		_ +			
Total			\$0.00 Copy b	oro →	\$0.00
Total			Copy n	ere. → ¯	· ·
14. Your current monthly income. Subtract	the total in line 13 from line 12.				\$0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period Case 1:24-bk-00754-HWV Doc 12 Filed 04/16/24 Entered 04/16/24 08:45:18 Desc

ebtor 1	Darlene	L.	Lookingbill	Case number (if known) 1:24-bk-00754				
	First Name	Middle Name	Last Name					
5. Calculate y	our current mont	thly income for the yea	ır. Follow these steps	s:				
15a. Copy	line 14 here →.				\$0.0			
Multip	ly line 15a by 12	(the number of months	in a year).		x 12			
15b. The r	esult is your curre	ent monthly income for	the year for this part	of the form	\$0.00			
		•						
	he median family the state in which	income that applies to	you. Follow these s					
		eople in your household	- '	Pennsylvania				
TOD. FIII III	the number of pe	eople in your nousehold	-					
16c. Fill in	the median family	y income for your state	and size of househo	old	\$64,277.0			
		le median income amo n. This list may also be		the link specified in the separate ruptcy clerk's office.				
7. How do the	e lines compare?							
_{17a.} 🗹	Line 15b is less th	han or equal to line 16c	. On the top of page	1 of this form, check box 1, Disposable income is not deter	rmined under 11			
_	U.S.C. § 1325(b)	(3). Go to Part 3. Do No	OT fill out Calculation	n of Your Disposable Income (Official Form 122C–2). orm, check box 2, Disposable income is determined under				
	1325(b)(3). Go to		culation of Your Disp	posable Income (Official Form 122C–2). On line 39 of that				
rt 3: Calcu	late Your Com	nmitment Period Ur	nder 11 U.S.C. §1:	325(b)(4)				
8 Conv your	total average mo	nthly income from line	11.		•			
					\$0.0			
calculating amount fror	the commitment p m line 13.	period under 11 U.S.C.	§ 1325(b)(4) allows y	use is not filing with you, and you contend that ou to deduct part of your spouse's income, copy the				
19a. If the m	arital adjustment	does not apply, fill in 0	on line 19a		- \$0.0			
19b. Subtrac	ct line 19a from li	ne 18.			\$0.00			
0. Calculate y	our current mont	thly income for the yea	ır. Follow these steps	S.				
20a Convilin	e 19h				\$0.0			
		er of months in a year).			x 12			
	2, .= (ea	cc a y ca.,.						
20b. The resu	ılt is your current	monthly income for the	year for this part of t	he form.	\$0.00			
20c. Copy the	e median family in	come for your state an	d size of household f	rom line 16c	\$64,277.00			
	lines compare?	-	u 0.20 0					
☑ Line 20b	is less than line 2	Oc. Unless otherwise o	rdered by the court, o	on the top of page 1 of this form, check box 3,				
	•	3 years. Go to Part 4.						
		qual to line 20c. Unless nent period is 5 years. (by the court, on the top of page 1 of this form,				
rt 4: Sign I	Below							
By signing h	ere, under penalty	y of perjury I declare th	at the information on	this statement and in any attachments is true and correct.				
				·				
X <u>/s/ [</u>	Darlene L. Lookii	ngbill						
Signa	ature of Debtor 1							
Date	04/15/2024 MM/ DD/ YYYY	<u> </u>						
-		ill out or file Form 122C						
If you check	ed 17b, fill out For	rm 122C-2 and file it w	ith this form. On line	39 of that form, copy your current monthly income from line	e 14 above.			

Official Form 122C-1